

A/re-issue

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PTO/SB/50 (02-01)

Approved for use through 01/31/2004. OMB 0651-0033

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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REISSUE PATENT APPLICATION TRANSMITTAL

Address to: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231	Attorney Docket No.	PHN 14989R
	First Named Inventor	AEMILIANUS G.J. STARING
	Original Patent Number	5,986,400
	Original Patent Issue Date (Month/Day/Year)	NOVEMBER 16, 1999
	Express Mail Label No.	

APPLICATION FOR REISSUE OF:
(check applicable box)☐ Utility Patent☐ Design Patent☐ Plant Patent

APPLICATION ELEMENTS (37 CFR 1.173)

1. ☒ Fee Transmittal Form (e.g., PTO/SB/56)
(Submit an original, and a duplicate for fee processing)
2. ☐ Applicant claims small entity status. See 37 CFR 1.27.
3. ☒ 14 Pages of Specification, Claims and Abstract
4. ☒ Drawing(s) (proposed amendments, if appropriate)
5. ☒ Reissue Oath / Declaration (original or copy)
(37 C.F.R. § 1.175)(PTO/SB/51 and 52)
6. ☒ Power of Attorney
7. Original U.S. Patent currently assigned? ☒ Yes ☐ No
(If Yes, check applicable box(es))
 - ☒ Written Consent of all Assignees (PTO/SB/53)
 - ☒ 37 C.F.R. § 3.73(b) Statement
(PTO/SB/96)
8. ☐ CD-ROM or CD-R in duplicate, Computer Program
(Appendix) or large table
9. Nucleotide and/or Amino Sequence Submission
(if applicable, all of the following are necessary)
 - a. ☐ Computer Readable Form (CFR)
 - b. Specification Sequence Listing on:
 - i. ☐ CD-ROM (2 copies) or CD-R (2 copies); or
 - ii. ☐ paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

10. ☐ Statement of status/support for all changes to the claims.
See 37 CFR 1.173(c).
11. ☐ Original U.S. Patent for surrender
 - ☐ Ribbonded Original Patent Grant
 - ☐ Statement of Loss (PTO/SB/55)
12. Foreign Priority Claim (35 U.S.C. 119)
(if applicable)
13. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
14. ☐ English Translation of Reissue Oath/Declaration
(if applicable)
15. ☒ Preliminary Amendment
16. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
17. ☒ Other: Reissue Application by the Assignee, Offer to
Surrender Patent-(PTO/SB/54)
Authorization Pursuant to 37 CFR 1.136(a)
US PATENT 5,986,400

14. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here)	or <input type="checkbox"/> Correspondence address below	
Name: U.S. Philips Corporation		
Address: 580 White Plains Road		
City: Tarrytown	State: NY	Zip Code: 10591
Country: USA	Telephone: (914) 332-0222	Fax: (914) 332-0615

NAME (Print/Type)	Norman N. Spain	Registration No. (Attorney/Agent)	17,846
Signature	<i>Norman N. Spain</i>	Date	1/18/01

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REISSUE APPLICATION FEE TRANSMITTAL FORM					Docket Number (Optional) PHN 14,989R			
Claims as Filed - Part 1								
Claims in Patent	For	Number Filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity		
				Rate	Fee	Rate	Fee	
(A)	Total Claims (37 CFR 1.16(j)) Independent Claims (37 CFR 1.16(i))	(B)	=	X\$	or	X\$18.00		
(C)		*	=	X\$		=		
			=	X\$		=		
Basic Fee (37 CFR 1.16(h))					\$		\$ 740.00	
Total Filing Fee					\$	OR	\$ 740.00	
Claims as Amended - Part 2								
	(1) Claims Remaining After Amendment	MINUS	(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	***	MINUS	**	*	X\$	=	or	X\$
Independent Claims (37 CFR 1.16(i))	***	MINUS	*****	=	X\$	=	or	X\$
Total Additional Fee					\$	OR	\$	
<p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims</p> <p>**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).</p> <p>***** Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p> <p><input type="checkbox"/> Applicant claims small entity status. See 27 CFR 1.27.</p> <p><input type="checkbox"/> Please charge Deposit Account No. 14-1270 in the amount of \$740.00 . A duplicate copy of this sheet is enclosed.</p> <p><input type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. 14-1270. A duplicate copy of this sheet is enclosed.</p> <p><input type="checkbox"/> A check in the amount of \$ _____ to cover the filing / additional fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on form PTO-2038.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="width: 30%;"> <p><u>11/13/01</u></p> <p>Date</p> </div> <div style="width: 60%; text-align: center;"> <p><u><i>Norman N. Spain</i></u></p> <p>Signature of Applicant, Attorney or Agent of Record</p> <p style="margin-top: 20px;">Norman N. Spain, Reg. # 17,846</p> <p>Typed or printed name</p> </div> </div>								


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REISSUE APPLICATION DECLARATION BY THE ASSIGNEE		Docket Number (optional) PHN14,989R
<p>I hereby declare that:</p> <p>My residence and post office address and citizenship are stated below next to my name.</p> <p>I am authorized to act on behalf of the following assignee: U.S. PHILIPS CORPORATION</p> <p>and the title of my position with said assignee is: Authorized Signatory</p> <p>The entire title to the patent identified below is vested in said assignee.</p>		
Name of Patentee(s): AEIMILIANUS G.J. STARING, DAVID B. BRAUN		
Patent Number 5,986,400	Date of Patent Issued NOVEMBER 16, 1999	
Title of Invention ELECTROLUMINESCENT DEVICE COMPRISING A TRANSPARENT STRUCTURED ELECTRODE LAYER FROM A CONDUCTIVE POYLMER		
<p>I believe said patentee(s) to be the original, first and sole/joint inventor(s) of the subject matter which is described and claimed in said patent, for which a reissue patent is sought on the invention entitled</p> <p>ELECTROLUMINESCENT DEVICE COMPRISING A TRANSPARENT STRUCTURED ELECTRODE LAYER FROM A CONDUCTIVE POYLMER</p> <p>the specification of which</p> <p><input checked="" type="checkbox"/> is attached hereto.</p> <p><input type="checkbox"/> was filed on _____ as reissue application number _____ / _____</p> <p>and was amended on _____</p> <p>(If applicable)</p> <p>I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.</p> <p>I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.</p> <p>I verily believe the original patent to be wholly or partly inoperative or invalid, for the reasons described below. (Check all boxes that apply.)</p> <p><input type="checkbox"/> by reason of a defective specification or drawing.</p> <p><input checked="" type="checkbox"/> by reason of the patentee claiming more or less than he had the right to claim in the patent.</p> <p><input type="checkbox"/> by reason of other errors.</p> <p>At least one error upon which reissue is based is described as follows:</p> <p>At least one claim should have been included to provide protection for the electroluminescent device of the invention in which the active layer is made from a semiconducting soluble conjugated polymer.</p> <p>[Attach additional sheets, if needed.]</p> <p>All errors corrected in this reissue application arose without any deceptive intention on the part of the applicant.</p>		


[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 0.5 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231

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(REISSUE APPLICATION DECLARATION BY THE ASSIGNEE)		Docket Number (Optional) PHN 14,989R	
I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.			
Name(s)		Registration Number	
NORMAN N. SPAIN		17,846	
MICHAEL E. MARION		32,266	
Correspondence Address: Direct all communications about the application to:			
<input type="checkbox"/> Customer Number		<div style="border: 1px solid black; width: 150px; height: 30px; margin: 0 auto;"></div> <div style="text-align: center;">→</div> <div style="border: 1px solid black; padding: 5px; width: 100px; float: right;">Place Customer Number Bar Code Label Here</div>	
OR		Type Customer Number Here	
<input type="checkbox"/> Firm or Individual Name	U.S. PHILIPS CORPORATION		
Address	580 WHITE PLAINS ROAD		
Address			
City	TARRYTOWN	State	NY Zip 10591
Country	USA		
Telephone	914 332-0222	Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine and imprisonment, or both, under 18 U.S.C. 1001, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this declaration is directed.			
Full name of person signing (given name, family name) MICHAEL E. MARION			
Signature		Date	
		11/13/01	
Address of Assignee 580 WHITE PLAINS ROAD TARRYTOWN, NY 10591			
Patentee AEIMILIANUS G.J. STARING		Citizenship THE NETHERLANDS	
Residence/Post Office Address GROENEWOUDSEWEG 1 5621 BA EINDHOVEN THE NETHERLANDS			
Patentee DAVID B. BRAUN		Citizenship USA	
Residence/Post Office Address 459 N. TASSAJARA DRIVE SAN LUIS OBISPO, CA 93405			

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REISSUE APPLICATION: CONSENT OF ASSIGNEE; STATEMENT OF NON-ASSIGNMENT		Docket Number (Optional) PHN 14,989R
This is part of the application for a reissue patent based on the original patent identified below.		
Name of Patentee(s) AEMILIANUS G.J. STARING, DAVID B. BRAUN		
Patent Number 5,986,400	Date Patent Issued November 16, 1999	
Title of Invention ELECTROLUMINESCENT DEVICE COMPRISING A TRANSPARENT STRUCTURED ELECTRODE LAYER MADE FROM A CONDUCTIVE POLYMER		
<p>1. <input checked="" type="checkbox"/> Filed herein is a certificate under 37 CFR 3.73(b). (Form PTO/SB/96)</p> <p>2. <input type="checkbox"/> Ownership of the patent is in the inventor(s), and no assignment of the patent has been made.</p> <p>One of boxes 1 or 2 above must be checked. If multiple assignees, complete this form for each assignee. If box 2 is checked, skip the next entry and go directly to "Name of Assignee".</p> <p>The written consent of all assignees and inventors owning an undivided interest in the original patent is included in this application for reissue.</p>		
The assignee owning an undivided interest in said original patent is/are <u>U.S. PHILIPS CORPORATION</u> and the assignee(s) consents to the accompanying application for reissue.		
Name of assignee/inventor (if not assigned) U.S. Philips Corporation		
Signature 	Date 11/13/01	
Typed or printed name and title of person signing for assignee (if assigned) Michael E. Marion Authorized Signatory		

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STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: AEMILANUS G.J. STARING, DAVID B. BRAUNApplication No./Patent No.: 5,986,400 Filed/Issue Date: November 16, 1999Entitled: Electroluminescent Device Comprising A Transparent Structured Electrode Layer Made From A Conductive Polymer

U.S. PHILIPS CORPORATION, a CORPORATION.

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☐ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.
The extent (by, percentage) of its ownership interest is _____ %

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 7740 Frame 0484/85 or for which a copy thereof is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

2. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

3. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

- ☐ Copies of assignments or other documents in the chain of title are attached.
[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

11/13/01
Date

Michael E. Marion

Michael E. Marion
Signature

Authorized Signatory

Title